



# Berkshire Education Committee.

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**REPORT**  
*of the*  
**SCHOOL MEDICAL OFFICER**  
*for the Years*  
**1947 and 1948.**







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*To the Chairman and Members of the  
Berkshire Education Committee.*

I have the honour to present the report on the School Health Service for the years 1947 and 1948.

During the two years considered in this report, slow but steady progress has been made in the process of restoring the School Health Service following the disturbance that it had suffered during the war years. Much greater progress could have been made if it had not been for the continuing shortage of School Nurses, a matter to which I make further reference later. A considerable advance was made in June, 1947, when the Committee established the appointment of Senior Assistant School Medical Officer, and Dr. W. F. Waudby-Smith was promoted to this post. At the same time the Committee considered the question of Assistant School Medical Officers, and an establishment of six was authorised. During the early part of 1947, the County Council adopted a scheme of joint appointments of Medical Officers of Health to District Councils and Assistant County Medical Officers, the medical officers undertaking the school medical work of the Education Committee. It was only possible to proceed gradually with this scheme, and the filling of the full establishment of Assistant School Medical Officers was somewhat delayed in consequence. The first of the new joint appointments was made at Windsor in November, 1947, and it was not until May, 1949, that the other two appointments could be completed in North Berks.

In 1947 the Committee also established the appointment of Senior School Dental Officer, in accordance with the requirement of the Ministry, and Mr. O. Jacob was promoted to the post. A further advance in the dental field was made when it was decided, in 1948, to obtain two mobile dental units. The first of these arrived in October, 1948. In a rural county like Berkshire these should prove of considerable value. I should like to draw attention to the extremely interesting special report of the Senior School Dental Officer on pages 18-20.

A third appointment of importance to be established, in September, 1948, was that of the first full-time Speech Therapist, and it is clear that this work will have to be further developed. Arrangements were also made in 1948 for the appointment of a Home Teacher with special experience in the teaching and physical training of spastic children. This is, undoubtedly, the filling of a long-felt want and it is hoped that it may be possible to extend this work, later, to children suffering from other physical defects who must receive education in their own homes, whether from the special circumstances of their case, or because of the shortage of places in hospital schools and special schools for the physically handicapped.

Early in 1947 the work of preparation for the National Health Service Act, 1946, was commenced, and continued until 5th July, 1948, when the Act came into operation. During the preparatory stages, there was consultation between the Education and Health Committees; it was agreed that the school medical staff should give certain assistance in regard to the mental deficiency work of the Council in its new capacity of Local Health Authority, and additions were made to the establishment of School Nurses. Unfortunately, as I have stated above, recruitment of nurses has been very difficult, and has been a major handicap to the process of development of the service.

The need for development applies particularly to the question of "special" inspections and re-inspections, which have been during and since the war far below the numbers that should be carried out, as comparison with the figures for the country at large clearly demonstrate. The necessary



expansion and development of this work, together with that of the "follow up" of cases in their homes, can only take place as the school nursing staff can be built up, and this process must necessarily take time, in view of the difficulties in recruitment. The county has one advantage over many others, however, in that its situation is attractive, and we have been able to obtain nurses who have made individual application for this reason more often than we have been able to do by the ordinary process of advertisement.

The other main difficulty in the work of the School Health Service has been that of the very serious shortage of places in Special Schools for handicapped pupils, particularly the educationally subnormal. The waiting list of the latter was 50 in January, 1947, and had risen to 91 in January, 1948. This increase is, undoubtedly, due very largely to the fact that the activity of the school medical staff has developed considerably in relation to this field of work. It is to be hoped that the Committee will be able to proceed in the near future with the residential school for these children which it has included in its Development Plan. At the end of 1946 the Committee had taken over nine of the Wartime Nurseries that had been established by the Health Committee, and these day nurseries became Nursery Schools. Early in 1947, special arrangements were made for the medical inspection of the children in this important age group.

Consideration was given, in the latter part of 1948, to the question of the ages at which routine school medical inspection should be carried out, particularly in the light of the alterations that have been made by the Minister in regard to this matter, and it was hoped that some definite policy could be decided early in 1949.

The vital statistics of the County have shown further marked improvement during the two years dealt with in the report, and I am convinced that the health of the school children of the County has shown corresponding improvement. There is no doubt that the rapidly increasing provision of School Meals has had, and will continue to have, a large part in this improvement, and it will be observed from the data in the body of the report that the state of nutrition continues to be satisfactory, although there is still, of course, room for improvement.

The coming into operation of the National Health Service Act, 1946, saw the end of the provision that the Committee had made, under Ministry of Education Circular 102, for the hospital treatment of school children. Under the new National Health Service Act, the entire system of curative medicine, whether in hospital or otherwise, became a free service to all, and Education Authorities were no longer called upon to discharge this very large financial commitment. But it must be borne in mind that the Authority is still required, under the Education Act, 1944, to facilitate the obtaining of treatment, where necessary, for defects found at school medical inspections: in effect, indeed, to see that such treatment is obtained.

I much regret the delay that has attended the appearance of this report, a delay that began to affect the reports of the war years, and that has affected subsequent reports in decreasing measure. The difficulties that have occasioned the present delay are now very largely overcome, and I hope that this will be the last occasion when such delay will occur.

I should like to express my sincere appreciation for the work that has been carried out, during these two years, by the clerical and professional staff of my department, and my thanks to the Committee and to the Director of Education and his staff, from whom I have received so much kindness and help at all times.

E. C. H. HUDDY,

*November, 1949.*

*School Medical Officer.*

# Staff of the School Health Service, 1947 and 1948.

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## *School Medical Officer :*

E. C. H. HUDDY, M.D., B.S., D.P.H.

## *Senior Assistant School Medical Officer (as from 1.6.47) :*

W. F. WAUDBY-SMITH, M.R.C.S., L.R.C.P.

## *Assistant School Medical Officers :*

H. M. AGNEW, M.R.C.S., L.R.C.P., L.R.F.P.S., D.P.H.

E. M. BELL, M.B., Ch.B., D.P.H. (Part-time).

D. L. V. FRASER, M.R.C.S., L.R.C.P., D.A.

V. L. HICKSON, M.R.C.S., L.R.C.P., D.P.H. (Commenced 1.1.47).

N. W. HOLLOWAY, M.R.C.S., L.R.C.P. (Part-time).

M. T. I. JONES, M.B., B.S., M.R.C.S., L.R.C.P. (Part-time ; commenced 30.6.47).

A. G. LEGGATT, M.B., Ch.B., D.P.H. (Part-time ; resigned 31.12.48).

M. J. O'DONNELL, M.B., B.Ch., B.A.O. (Part-time).

E. H. C. STEWART, L.R.C.P., L.R.C.S., L.R.F.P.S. (Commenced 12.1.48).

F. M. C. WOLFE, M.B., B.Ch., B.A.O. (Commenced 19.4.48).

## *Senior School Dental Officer (as from 1.6.47) :*

O. JACOB, L.D.S., R.C.S. (Eng.)

## *Assistant School Dental Officers :*

MISS E. M. CURRIE, L.D.S.

MISS S. S. GRANDISON, L.D.S. (Resigned 31.3.47).

C. C. GRANT, L.D.S. (Commenced 3.5.48).

W. K. T. HOPE, L.D.S. (Part-time ; resigned 31.12.47).

C. F. W. MOXLEY, L.D.S.

MISS E. M. S. SCANLAN, L.D.S.

H. TREALEVAN, L.D.S. (Part-time).

## *Ophthalmic Surgeons (Part-time) :*

R. W. CAREY, D.O.M.S. (Commenced 5.4.48).

K. FAWSETT, D.O.M.S.

A. G. L. HOULTON, D.O.M.S.

R. H. RUSHTON, D.O.M.S.

W. K. SMILEY, D.O.M.S. (Commenced 1.1.48).

R. C. WILLIAMS, D.O.M.S. (Resigned 5.1.48).

M. H. WRIGHT, D.O.M.S. (Commenced 14.1.48).



*Speech Therapist :*

MISS A. M. BAIN, L.C.S.T. (Commenced 27.9.48).

*Psychiatrists :*

DR. L. F. HUTTON, B.A., M.R.C.S., L.R.C.P.

DR. M. E. E. WARD, M.B., B.S., M.R.C.S., L.R.C.P., D.P.M.

*Clinical Psychologist :*

MISS E. TOWNSEND (Resigned 21.12.47).

*Educational Psychologist :*

MRS. M. F. SCOTT-BLAIR (Part-time).

*Psychiatric Social Workers :*

MISS R. CAMPBELL.

MISS E. CARBERRY.

*School Nurses :*

MRS. E. M. BOLTON (Part-time).

MISS K. M. TAYLOR (Part-time).

MISS C. HART.

MISS O. A. UNDERWOOD (Part-time).

MISS O. V. MORDECAI (Part-time).

MISS A. WEBBER.

MISS B. OWEN (Part-time).

MISS C. E. WELLS.

MISS K. M. STEPHENS (Part-time).

MISS C. WILSON.

MISS R. L. D. SULLIVAN (Part-time).

MISS E. S. WYLY (Part-time).

*School Dental Attendants :*

MISS A. ADEY (Full-time as from  
6.9.48).

MISS M. NORMAN.

MISS J. TYTE (Resigned 4.8.48).

MISS P. ELTON.

MISS K. WALTERS.

MISS G. A. McNICOL.

# BERKSHIRE EDUCATION COMMITTEE

## School Health Service

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### REPORT OF THE SCHOOL MEDICAL OFFICER FOR THE YEARS 1947 AND 1948.

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#### AREA AND POPULATION.

The area controlled by the Berkshire Education Authority comprises the whole of the geographical county of Berkshire, with the exception of the County Borough of Reading. The civilian population was estimated by the Registrar-General as 276,790 at the end of 1947.

Under the jurisdiction of the Berkshire Education Committee there are 263 schools and, of these, 13 are Nursery Schools, 135 are Primary, 87 are All Age, 16 are Secondary Modern, and 12 are Secondary Grammar Schools.

The total number of children on the school rolls was approximately 33,000 at the end of 1948; about 500 were at Nursery Schools, 20,757 at Primary, 3,189 at All Age, 4,331 at Secondary Modern, and 3,794 at Secondary Grammar Schools.

#### STAFF.

There were various changes, in the professional staff, during the two years. In 1947 Dr. W. F. Waudby-Smith was promoted to the post of Senior Assistant School Medical Officer and Mr. O. Jacob to that of Senior School Dental Officer. Dr. M. T. I. Jones was appointed, in the Windsor Divisional Administrative Area, to fill the vacancy caused through the death, in 1946, of Dr. A. D. Crofts. Dr. V. L. Hickson joined the medical staff in 1947, and Drs. E. H. C. Stewart and F. M. C. Wolfe in 1948.

The vacancy caused by the resignation in 1947 of Miss S. S. Grandison, Assistant School Dental Officer, was filled in 1948 by the appointment of Mr. C. C. Grant.

Mr. W. K. T. Hope, part-time Assistant School Dental Officer at Newbury, resigned at the end of 1947 and his place has not yet been filled.

Three new part-time Ophthalmic Surgeons, Drs. R. W. Carey, W. K. Smiley, and M. H. Wright, commenced work in 1948, and Dr. R. C. Williams resigned during the same year.

Miss A. M. Bain, Speech Therapist, commenced work in 1948.

#### HYGIENIC CONDITION OF SCHOOLS.

The hygienic condition of school buildings was again investigated at the time of periodic medical inspection by the Assistant School Medical Officers. Detailed reports are submitted on prescribed forms and all defects are reported to the Director of Education. There is no doubt that much more would be done under this head if it had not been for present difficulties in regard to building operations of all kinds.



## CO-ORDINATION.

The Infant Welfare and School Health Services work in close co-operation and, in many cases, the School Nurses are also Health Visitors. This arrangement has the advantage that the same official supervises the children from birth until they leave school.

The fullest collaboration has again been maintained between the department and the District Medical Officers of Health in the investigation and control of outbreaks of infectious disease.

Children suspected by the Assistant School Medical Officers to be suffering from tuberculous disease are referred to the Chest Physician of the Regional Hospitals Board, who examines and, when necessary, arranges for subsequent treatment.

Particulars regarding co-operation with teachers, attendance officers, parents, and voluntary bodies are mentioned later in this report.

## MEDICAL INSPECTION.

Medical inspection of the following age groups was made during the two years covered by this report :—

Entrants ... i.e., all children who entered school since the date of the last medical inspection at such school, and who had not been previously inspected.

Intermediates ... i.e., all children who attained the age of eight years since the date of the last inspection and who had not been previously inspected in this group.

Leavers ... i.e., all children who had attained the age of twelve years since the date of the last inspection, and those over the age of thirteen years who had not been examined after attaining the age of twelve years.

In addition, all new admissions from other schools and “specials” (i.e. children found to be abnormal at a previous medical inspection or referred for examination, on account of suspected defects, by teachers, parents, school attendance officers, etc., and all children classified as Handicapped Pupils) were medically examined.

Medical inspections are generally carried out in the schools but, in a few instances, use is being made of outside premises. In those schools where a special medical inspection room is not available, some interference with the ordinary routine work is, unfortunately, inevitable and the work of the Assistant School Medical Officers, to carry out an efficient examination, is made more difficult in such cases.

## EMPLOYMENT OF SCHOOL CHILDREN.

Applications were made on behalf of 243 children in 1947, and 246 in 1948, for “Employment Certificates.” In no case was a child refused a certificate on medical grounds, and no instance of injury to health was reported which could reasonably be attributed to employment. The total number of children employed remains fairly constant.

The following table shows the number of employed children, classified into the various occupations :—

				<u>1947</u>	<u>1948</u>
Horticultural work ...	...	...	...	13	13
Bread delivery ...	...	...	...	2	3
Domestic work ...	...	...	...	14	15
" Errands " ...	...	...	...	26	53
Milk delivery ...	...	...	...	4	2
Newspaper delivery...	...	...	...	175	153
Telegrams ...	...	...	...	4	3
Miscellaneous ...	...	...	...	5	4
Totals ...	...	...	...	<u>243</u>	<u>246</u>

### FINDINGS OF MEDICAL INSPECTION AND ARRANGEMENTS FOR TREATMENT.

#### NUTRITION.

The nutritional state of all the children examined at periodic medical inspection was assessed by the Assistant School Medical Officers, and the following table is a summary of the findings, tabulated into the three prescribed groups. These figures do not include children examined as " Specials."

<i>Groups.</i>	<i>1947.</i>		<i>1948.</i>	
	Number.	Per cent.	Number.	Per cent.
A (good) ...	4,545	37·8	3,722	30·2
B (fair) ...	6,272	52·2	7,603	61·7
C (poor) ...	1,182	9·8	986	8·0

It should be noted that children are now classified into three categories, instead of four as shown in this table for 1946 :—

<i>Groups.</i>	<i>1946.</i>	
	Number.	Per cent.
A (excellent) ...	2,165	18·2
B (normal) ...	8,072	67·9
C (slightly subnormal) ...	1,502	12·6
D (bad) ...	137	1·1

The figures show that the nutrition of the school children continues to be very satisfactory.

Due allowance should be made, in the consideration of these figures, for the method of assessment, which must of necessity be clinical, and therefore liable to variation according to the impressions of the individual examiners.



The estimation of nutrition depends upon a multiplicity of factors. General appearance, muscular development, the amount of fat covering the muscular and skeletal tissues, together with reports on the child's interest, progress in school work, and activity in games, have all to be taken into account before the Assistant School Medical Officers make their final decision.

Such items as home circumstances, lack of parental control, insufficient sleep, hurried meals, and unsuitable food are not without significance in connection with the aetiology of malnutrition.

Further details will be found in Table 2 (B) on page 24.

#### MILK IN SCHOOLS.

Free milk is now supplied to all children at school, in accordance with the regulations, and an average of 21,966 children were supplied daily during the two years.

Every effort is made to obtain either Tuberculin Tested or Pasteurized Milk, and about 90% of the schools are receiving one of these two grades.

#### SCHOOL MEALS.

The facilities for the provision of meals in school have again been enlarged and an average of 15,141 dinners were supplied daily in 1947 and 18,326 in 1948 : 1,173 dinners in 1947 and 1,395 in 1948 were supplied free.

#### UNCLEANLINESS.

The School Nurses made 39,604 examinations in the schools during 1947, and 59,055 in 1948, for the detection of uncleanliness, and 1,160 children in 1947 (and 1,736 in 1948) were found to be unclean ; of these numbers, 224 and 166 respectively were excluded from school for varying periods.

Re-inspections were also made and 7,680 children were re-examined in 1947 and 7,231 in 1948 ; of these numbers, 460 and 237 were still found to be unclean, and 123 and 53 were re-excluded.

Uncleanliness was, as usual, more prevalent at the commencement of the school terms, particularly following the summer holiday, but the general standard of cleanliness remains high.

Once again a number of requests were received from Head Teachers for a visit to their schools by the School Nurses. It is clear that the Head Teachers are continuing to exercise unceasing vigilance to prevent uncleanliness amongst the pupils in their charge.

#### MINOR AILMENTS AND DISEASES OF THE SKIN.

A total of 9,925 attendances in 1947, and 11,173 in 1948, were made by children at the Minor Ailments Clinics in the Boroughs of Maidenhead, Newbury, and New Windsor.

Facilities for treatment of minor ailments by general medical practitioners, at the out-patient departments of hospitals, and by either District or School Nurses, are available for children living outside these boroughs.



Skin diseases were less prevalent and, since the war, the incidence of Impetigo and Scabies has gradually decreased. The following table shows the numbers of cases for the last three years :—

<i>Disease.</i>	<i>1946.</i>	<i>1947.</i>	<i>1948.</i>
Impetigo ...	554	278	190
Scabies ...	205	119	51

X-ray treatment for ringworm of the scalp was provided for 18 children in 1947, and for 5 in 1948.

#### VISUAL DEFECTS AND EXTERNAL EYE DISEASE.

All children found at periodic medical inspection to be suffering from either defective vision or external eye disease are referred to one of the Education Authority's part-time Ophthalmic Surgeons, and arrangements for re-examination are made in accordance with the need of each case.

In addition to those children recommended by the Assistant School Medical Officers for attendance at eye clinics, 168 requests for attendance were received from parents, hospitals, general practitioners, etc., in 1947, and 245 in 1948.

Eye clinics were held at 18 different centres. The following table summarises the work at these clinics :—

	<u>1947</u>	<u>1948</u>
Number of children examined or re-examined ...	2,603	3,857
Number recommended to obtain spectacles ...	736	1,051
Number recommended treatment other than by spectacles ...	175	207

The work of the Orthoptic Clinics, where cases of squint receive special treatment, is increasing from year to year. These cases are treated at the Eye Hospital, Oxford, the Royal Berkshire Hospital, Reading, and at Greenham House, Newbury.

Spectacles were supplied free to all cases, except where the parents required frames other than nickel, up to 5th July, 1948, when the National Health Service Act came into force. Damaged nickel-framed spectacles were also repaired free of charge to the parents. New spectacles were distributed personally by the School Nurses to ensure a satisfactory fit.

Operative treatment for squint is carried out at either the Royal Berkshire Hospital, Reading, or the Eye Hospital, Oxford.

One new case was admitted to a Special School for the Partially Blind in 1947 and one in 1948. Liability was accepted for one blind case, in 1947, whose parents had moved into this area from that of another Local Education Authority, and 3 new cases were admitted to Special Schools for the Blind in 1948.

## DIPHTHERIA IMMUNISATION.

Forty-two school children were immunised and 17 received reinforcing doses in 1947, and 122 and 12 respectively in 1948. The drop in these numbers, compared to previous years, is due to the fact that the majority of children have received their primary immunisation, prior to admission to school, as a result of numerous campaigns by this Authority, or under the arrangements that the County Council made in 1946 for free immunisation by the family doctor.

In addition, 504 children under the age of five years, were immunised by the Assistant School Medical Officers in 1947, but in 1948 the numbers had dropped to a negligible figure.

## NOSE AND THROAT DEFECTS.

Operative treatment of diseased tonsils and adenoids was carried out at the following hospitals :—

The Hospital, Abingdon.  
 The District Hospital, Newbury.  
 The Radcliffe Infirmary, Oxford.  
 The Royal Berkshire Hospital, Reading.  
 The Hospital, Savernake.  
 The District Hospital, Wallingford.  
 The Cottage Hospital, Wantage.  
 The King Edward VII Hospital, Windsor.

Operative treatment was provided, at these hospitals, for 357 children during 1947 and for 244 in 1948.

## EAR DISEASE AND DEFECTIVE HEARING.

The School Nurses visited all known cases of ear disease, and the parents of the children concerned were strongly urged to seek the necessary treatment. In the majority of instances this was obtained from either general practitioners or at the special clinics at the general hospitals.

Five new cases were admitted to Special Schools for the Deaf and Dumb in 1947, and a further 5 during 1948.

## HEART DISEASE.

The Assistant School Medical Officers supervised all children suffering from heart defects which did not prevent attendance at school, whilst those who were unable to go to school were visited in their homes.

One new case was admitted for a short period to a Heart Home in 1947, and 4 in 1948.

## TUBERCULOSIS.

During 1947 there were 12 cases of pulmonary tuberculosis among school children and, during the year, 14 cases were admitted to Peppard Sanatorium and 3 to other institutions. The corresponding figures for 1948 were 12 new cases, 6 admissions to Peppard Sanatorium and 9 to other institutions.

In regard to non-pulmonary tuberculosis, there were 21 new cases during 1947; 4 cases were admitted to the Wingfield-Morris Orthopaedic Hospital, Headington, and 17 to other institutions. The corresponding figures for 1948 were 40, 4, and 25 respectively.



### ORTHOPAEDIC DEFECTS.

The staff of the Wingfield-Morris Orthopaedic Hospital, Headington, is responsible for the treatment of children referred on account of crippling defects. Voluntary workers assist the staff at the clinics by undertaking nursing and clerical duties.

The following is a list of clinics, all managed by local voluntary committees and easily accessible to children attending schools in Berkshire :—

<u>Day.</u>	<u>Place.</u>	<u>Time.</u>
Monday	Henley (Southfield Hall, Reading Road)	2.0 p.m. ... (fortnightly)
	Wallingford (Memorial Hospital)	2.0 p.m. ... (fortnightly)
Tuesday	Newbury (Greenham House, St. John's Road)	11.0 a.m. ... (weekly)
	Abingdon (The Warren Hospital)	2.0 p.m. ... (fortnightly)
Thursday	Wantage (The Cottage Hospital)	2.30 p.m. ... (fortnightly)
Friday	Wokingham (The Memorial Clinic, Denmark Street)	2.0 p.m. ... (weekly)

Clinics are also held at the following hospitals, and are also available for Berkshire school children, but patients are seen by appointment only :—

Maidenhead, The Hospital.

Oxford, The Radcliffe Infirmary.

Reading, The Royal Berkshire Hospital.

Windsor, The King Edward VII Hospital.

In-patient treatment is usually provided at the Wingfield-Morris Orthopaedic Hospital, Headington. The Education Authority paid, until 5th July, 1948 (the commencing date of the National Health Service Act), the maintenance charge for each child admitted, provided that sanction had been obtained prior to the admission of the child in question. An annual grant was also made towards the cost of the expenses of the clinics.

During 1947 there were 51 children admitted to the Wingfield-Morris Orthopaedic Hospital, Headington ; 17 cases were admitted in 1948. Financial responsibility was accepted by the Education Committee for the treatment of 5 children in other such hospitals during 1947 and for 6 cases in 1948.

### INFECTIOUS DISEASES.

The names of children absent from school, on account of infectious disease are notified by the head teachers, and this information is forwarded to the District Medical Officers of Health.

Cases of skin disease are passed to the School Nurses for home visiting, when it is known that a doctor is not in attendance, in order that the parents may be given the necessary advice regarding treatment.

### DENTAL DEFECTS.

A Special Report by the Senior School Dental Officer will be found on pages 18-20.

Detailed figures are given in Table 4 on page 26.



## MENTALLY DEFECTIVE CHILDREN.

In accordance with the provisions of Section 57 of the Education Act, 1944, 19 children were reported to the Local Authority in 1947 and 15 were reported to the Local Health Authority (the new title as from 5th July, 1948) during 1948.

As from 1st August, 1947, it was possible for all Handicapped Children between the ages of 5 and 16 years who were unable to attend school, by reason of disability of mind, to be supplied with milk at 1½d. per pint, in accordance with instructions contained in Administrative Memorandum No. 238 of the Ministry of Education. By the end of that year, the parents of all the children concerned had been informed of the provisions of the Memorandum. Applications are dealt with as and when received from the parents.

## CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS, AND VOLUNTARY BODIES.

The attendance of parents at medical inspections is still satisfactory and remains at about 80 per cent.

The teachers, as in previous years, have gone to considerable trouble to ensure that the arrangements for medical inspection have worked smoothly. The high rate of acceptance for dental treatment, which occurs in a number of schools, is invariably due to the efforts of the teachers. Their interest and assistance is an indispensable factor in the success of any school health scheme.

The School Attendance Officers reported children not in attendance at school, and have also supplied useful information concerning children absent for various reasons.

The local Inspectors of the N.S.P.C.C. have always given willing help in cases of parental neglect, and their very active co-operation in these distressing cases has been greatly appreciated.

## SPEECH CLINICS.

The speech clinic at Maidenhead ceased to function as from July, 1947, owing to the resignation of the Speech Therapist.

Certain other cases received Speech Therapy at the Radcliffe Infirmary, Oxford, and at the King Edward VII Hospital, Windsor.

During 1947 a total of 18 children were receiving treatment and 248 attendances were made. In 1948, 20 cases made 404 attendances.

The first whole-time Speech Therapist to be employed by the Education Authority was appointed on 27th September, 1948. So far, only three clinics, at Maidenhead, Newbury, and Reading, are functioning, but this work will be extended during 1949. A total of 47 children attended these three clinics and made 194 attendances. By the end of the year 10 cases had been discharged; 6 cured, 1 subject to follow-up, and 3 had ceased to attend. There are also 71 children on the waiting list for treatment.

The following table shows the type of defect in the 47 cases mentioned above :—

Stammering	...	...	...	...	19
Articulatory and language defects	...	...	...	...	15
Minor articulatory defects	...	...	...	...	9
Cleft palate speech	...	...	...	...	2
Vocal defects	...	...	...	...	1
Delayed speech	...	...	...	...	1
					—
Total	...	...	...	...	47
					—

The Speech Therapist inspected 138 children at 23 schools; of this number, 61 were recommended for treatment and 18 to be kept under observation.

#### HANDICAPPED PUPILS.

All handicapped children in attendance at school were examined at the periodic medical inspections, together with all new cases considered to require some form of special treatment.

A list of defects, together with numbers of cases, is given in Table 7 on page 30.

#### MISCELLANEOUS DEFECTS.

A number of children were admitted to different Homes and Hospitals for a variety of complaints, and for convalescent treatment following operations and illnesses.

New cases, so admitted, numbered 34 in 1947 and 35 in 1948.

The following tabulated list shows the number of cases admitted and the reasons for admission :—

				<u>1947</u>	<u>1948</u>
Convalescence	...	...	...	10	11
General debility	...	...	...	7	10
Asthma	...	...	...	5	1
Rheumatism	...	...	...	3	—
Injury to eye	...	...	...	2	—
Bronchitis	...	...	...	1	3
Chorea	...	...	...	1	—
Feverish attacks	...	...	...	1	1
Malnutrition	...	...	...	1	—
Encephalitis	...	...	...	1	—
Bitemporal heminopia	...	...	...	—	1
Post-operative debility	...	...	...	—	1
Broncho-pneumonia	...	...	...	—	1
Impetigo	...	...	...	—	1
Investigation of chest	...	...	...	—	1
Otorrhoea	...	...	...	—	1
Rheumatic heart	...	...	...	—	1
Pleural effusion	...	...	...	—	1
Bronchitis and Malnutrition	...	...	...	1	—
General debility and Nervousness	...	...	...	1	1
				—	—
Totals	...	...	...	34	35
				—	—

#### MALADJUSTED CHILDREN.

As from 1st October, 1947, the management of the Berkshire Child Guidance Clinics was transferred from the Berkshire Mental Hospital to



that of a Joint Committee of the Berkshire County and Reading Borough Education Committees.

The two Psychiatric Social Workers represent an increase, to that of 1946 on the staff of the clinics.

The headquarters of the clinics remain at 27, Kidmore Road, Caversham, with a branch at St. Ives Hotel, Maidenhead. Clinics are also held weekly at Greenham House, Newbury, and as and when required at the Hostels at Abingdon and Windsor.

No. 27, Kidmore Road, Caversham is also a hostel, and there are three others in the county area, situated at "Summerfield," Abingdon; "Villa Cellini," Maidenhead; and 100, Osborne Road, Windsor.

It should be noted that all the figures given below refer to the period 1st April, 1947, to 31st March, 1949.

The following table gives the details of the Berkshire children who were treated at the clinics during that period :—

Number on books at 1st April 1947.	Number of new cases.	Cases closed.							Number remaining on books at 31st March, 1949.
		After consultation only	After advice and consultation only	Adjusted	Improved	No change	Prematurely closed	Left, refused, etc.	
41	378	65	111	25	46	10	13	41	108

The main sources of maladjustment are few and can, in the majority of instances, be attributed to a disturbance in the parent-child relationship. The study of home conditions in these cases is, therefore, of the first importance.

As in previous years, the highest proportion of those referred for treatment belonged to the (C) Behaviour Disorder group. The other groups, in order of number of cases, were (B) Habit Disorders and Physical Symptoms, (D) Educational and Vocational Advice, and (A) Nervous Symptoms. When these groups are sub-divided it is found that the following are the chief symptoms in each : (C) Difficult Behaviour, (B) Enuresis, (D) Backwardness, and (A) Fear and Anxiety.

A total of 12 children were admitted to the three hostels, 4 to "Summerfield," Abingdon, 5 to "Villa Cellini," Maidenhead, and 3 to 100, Osborne Road, Windsor.

The following table shows the numbers of interviews and visits by the staff of the clinics :—

Psychotherapist.		Educational Psychologist.		Psychiatric Social Workers.		
Consultation.	Treatment.	Intelligence testing.	Remedial coaching.	Interviews at clinic.	School visits.	Home visits.
382	2,224	375	159	900 approx.	150 approx.	700 approx.



No children were admitted to Special Schools during 1947, but 13 cases were admitted to the Mulberry Bush School, Standlake, in 1948.

#### EDUCATIONALLY SUB-NORMAL.

These children remain a most difficult problem, owing to the serious lack of accommodation in residential special schools.

The work of ascertainment greatly increases and, at the end of 1948, there were a number of cases awaiting intelligence tests. As the degree of intelligence decreases so the work of ascertainment increases. It is, also, work which can only be carried out by specialist medical officers, and the number of cases awaiting testing is more than can be dealt with in the time at present available to the medical officers who hold the necessary qualifications to do this type of work.

This class of defect also covers a wide range : from the one who is merely dull and/or backward to the child who is certifiable under the Mental Deficiency Acts.

The following table shows the results of the examinations of educationally sub-normal children :—

<i>Year.</i>	Total number.	Considered to be capable of receiving education in an ordinary class in an ordinary school.	Considered to need education in a special class in an ordinary school.	Considered to need education in a special school.
1947 ...	663	327	287	49
1948 ...	525	322	161	42

The difficulty of providing suitable education for these children is accentuated by the largely rural nature of the county and the number ascertained greatly exceeds the number for whom provision is made.

No new cases were admitted to Special Schools in 1947, but 2 cases were admitted during 1948.

#### EPILEPTICS.

No new cases were admitted to Special Schools during 1947, but 2 were admitted in 1948.

#### SPASTIC PARALYSIS.

No cases were admitted in 1947, but 2 cases were admitted to Special Schools during 1948.

In 1948, arrangements were made to provide home-teaching for a small number of spastic children.

#### NURSERY SCHOOLS.

All the Nursery Schools were periodically visited and the children examined by an Assistant School Medical Officer.

As from June, 1947, arrangements were made for the School Nurses to assist the doctors at the periodic inspections and, apart from this, to visit each school once a month for a general examination of the children.

The results of the various inspections will be found in Table 6 on pages 27-29.

As from 1st August, 1947, children in attendance at grant-aided nursery schools were allowed two-thirds of a pint of milk per day. In only a very few instances was it found that the children were either unwilling, or unable, to take the milk.

Some of the Nursery Schools were visited, for the first time, by a School Dental Officer. Treatment is available as and when the necessary consent forms are received from the parents. Details are contained in Table 6 (C) on page 29.

#### SECONDARY GRAMMAR SCHOOLS.

These schools are visited for medical inspection purposes each term and, during the course of a year, every child in attendance is medically examined.

The following schools were inspected :—

Bracknell Ranelagh (Boys' and Girls').  
 Earley, Woodley Hill Grammar Boys'.  
 Faringdon County Girls'.  
 Maidenhead County Boys'.  
 Maidenhead County Girls'.  
 Newbury County Girls'.  
 Newbury Grammar Boys'.  
 Wallingford County Grammar (Boys' and Girls').  
 Wantage King Alfred Boys'.  
 Windsor County Boys'.  
 Windsor County Girls'.  
 Wokingham County Girls'.

Abingdon Roysse's Boys' School was inspected by invitation of the Governors of the school.

All numbers with regard to medical and dental inspection and treatment are now included in the figures given in the tables at the end, or in the body, of this report.

In most cases the defects found were due to either defective vision or minor orthopaedic defects.

Minor orthopaedic defects, besides being referred to the clinics, were referred also to the physical training instructors at the particular school.

#### MATERNITY AND CHILD WELFARE.

Certain work, by arrangement with the Education Committee, is undertaken for maternity and child welfare cases by the School Health staff.

Dental treatment is provided, to a small degree, for expectant and nursing mothers (see page 20).

A number of children under five years of age received Diphtheria Immunisation (see page 11), whilst a certain number also received dental treatment (see page 20).

Children under five years of age also received treatment at the School Eye and Orthoptic Clinics.

Detailed figures are given in Table 8 on page 31.

E. C. H. HUDDY,

11, Abbot's Walk,  
 The Forbury, Reading.

*School Medical Officer.*



REPORT  
OF THE  
SENIOR SCHOOL DENTAL OFFICER  
FOR THE YEARS  
1947 AND 1948.

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I have much pleasure in presenting this report on the Dental Inspection and Treatment of the children in attendance at schools maintained by the Berkshire Education Committee.

During the years under review, 21,731 children in 1947, and 21,544 in 1948, were examined by the Dental Officers at the routine school inspections and, of these numbers, 12,026 and 11,910 respectively were found to require treatment. By the end of 1947 a total of 7,531 children had received, or were still receiving, treatment. The figure in 1948 was 7,060.

The percentage of children treated was 62·62 of those requiring it in 1947, and 59·27 in 1948. These figures show an increase upon the previous year (1946), when the percentage was 52·48 : a very gratifying response.

Treatment is given, as far as possible, at centres readily accessible to the homes of the majority of the children. This often, unfortunately, entails carrying out treatment in halls and under general conditions which are far from ideal. This latter fact emphasises the need for the establishment of fixed clinics in the county.

A large number of centres is absolutely essential for the satisfactory working of a dental scheme in a rural area. Parents, and children, are loath to travel long distances to obtain dental treatment and it is invariably found that the rate of acceptance for treatment varies inversely with the distance to be travelled.

I am glad to be able to report that, in 1948, a fixed clinic was arranged, with the very active co-operation of the Matron, at the Faringdon Cottage Hospital. The equipment and facilities are very up to date.

This will help considerably with the dental treatment in the Faringdon district. It is to be hoped that it will be possible to organise further fixed, well-equipped clinics in the near future. Arrangements were in hand for the opening of such a clinic at Crowthorne.

A detailed summary of all the work carried out by the School Dental Officers is contained in Table 4 on page 26. A comparison of the results with those of the previous year, 1946, shows a decrease in the number of extractions. It is to be hoped that this will continue for it provides evidence of the improved state of the children's teeth and allows extra time to be spent on the far more important work of filling and, thereby, conserving the teeth.

The total number of children inspected remains almost the same as in the previous year ; so also does the number requiring treatment and those actually treated.

The number of permanent teeth filled shows a slight increase. As more time has been spent in this way, the number of temporary teeth filled has accordingly decreased.

It is still not possible to do any large amount of conservative work on the deciduous teeth, emphasis having to be laid on rendering the permanent dentition fit. Such work on the deciduous teeth will only be possible with an increase of dental staff.



It is of considerable interest to compare the figures for Berkshire with those of the country as a whole. These latter have been compiled by Dr. Wynne, of the Ministry of Education, from the latest available information. The three sets are shown in the following table :—

Area.	Year.	Fillings.	Extractions.	
			Permanent.	Temporary.
Whole Country ...	—	82.4	22.7	126.0
Berkshire ONLY ...	1947	98.2	16.2	82.0
	1948	100.3	15.8	103.0

(The figures are calculated per 100 children actually treated.)

It is gratifying to note that, in Berkshire, more fillings were done and less permanent teeth extracted ; this accounts, of course, for the fact that less temporary teeth also were extracted.

Gas Clinics at present are only held in the Boroughs of Maidenhead, Newbury, and New Windsor, where there are fixed clinics. At the majority of the places where temporary clinics are held it is not desirable to arrange gas clinics. One of the Assistant School Medical Officers, who is a specialist, administers the general anaesthetic.

Dentures are provided for the children who, through accident or other cause, have lost anterior teeth.

It will be noted that a commencement has been made with the inspection and treatment of children at Nursery Schools. It is hoped to visit all such schools during the coming year. Details of the work done in 1948 are contained in Table 6 on page 27.

It is gratifying to report that it has been possible to commence orthodontic work on a small scale. The following table shows the work done in orthodontics and dentures during 1948 :—

Regulation Plates (orthodontics).			Dentures.	
Impressions	Plates fitted.	Adjustments.	Impressions.	Plates fitted.
54	62	104	15	19

(Some impressions were taken at the end of the previous year, 1946, which accounts for the fact that more plates appear to have been fitted than impressions taken during the two years in question.)

It was necessary for X-ray photographs to be taken of the teeth of 3 children.

Emergency treatment was provided for 134 children in 1947 at the Reading Dental Service. This Service provided treatment, under an arrangement with the Berkshire Education Authority, by way of extractions only,

for those children in need of immediate treatment, but for whom there was no convenient clinic available at the particular time. As from 5th July, 1948, this Service ceased to exist and, up to that date, 37 children had received treatment.

There were no routine inspections of children under five years of age, but cases referred by Health Visitors, etc., received advice and, if acceptance was given, the necessary treatment. During 1947 treatment was provided for 379 cases. Fillings were done for 238 teeth and 126 were extracted. Full details of the work done in 1948 are given in Table 8 on page 31.

Expectant and nursing mothers are, so far, only treated in the Borough of Maidenhead and, during 1947, 83 cases were treated ; 183 teeth were filled and 156 extracted. The figures for 1948 will be found in Table 8 on page 31.

The county was unfortunate to lose, through resignation in 1947, the services of Miss Grandison, who had been on the staff since 1928. She was not replaced until 1948 when Mr. Grant was appointed.

A further loss took place, at the end of 1947, when Mr. Hope also resigned. He had for many years been working part-time in the borough of Newbury. He will, no doubt, be equally difficult to replace.

I can personally vouch for the very high standard of work performed by each of these Dental Officers and, apart from the Committee, I feel sure these two officers will be greatly missed by the children for whose dental health they worked so hard for so many years.

In November, 1947, I visited the East Riding of Yorkshire, where the Local Education Authority has three trailer type dental clinics in operation. I was very impressed by the up-to-date facilities available for treatment in these mobile clinics and recommended, to the School Medical Officer, that two should be obtained for use in this county. I had long felt that a mobile clinic, used in conjunction with fixed clinics, would go far to relieve the dental accommodation problem in a rural area.

I am now very pleased to report that the first, of two, mobile clinics was delivered to the county on 25th October, 1948. This clinic has proved extremely satisfactory in use, for every facility is available. The clinic provides ample working space and the equipment is excellent ; it is, in fact, well on a par with any modern dental surgery. It has attracted great attention in the county and should do much, as a means of propaganda, for the dental scheme. It will greatly help to alleviate the scarcity of clinic accommodation in the more outlying districts. The second mobile clinic is on order and it is anticipated that it will be delivered by the early part of 1949.

Whilst the dental scheme is gradually being extended to include more nursery schools, expectant and nursing mothers, and children under five years of age, the full expansion cannot take place until the staff is considerably increased. Taking into account the present state of affairs, in connection with dentists generally and the National Health Service, it is very doubtful if this increase will be possible ; we shall, in fact, be fortunate if, as has happened in several other counties, we do not lose staff.

May I again place on record my sincere thanks to the dental staff, both officers and attendants, for their continued and conscientious work, and to the clerical staff of the school health department without whose unremitting and, usually, unseen work no dental scheme can be truly successful.

O. JACOB,

*Senior School Dental Officer.*



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N.B.—Tables 1–5 are as prescribed by the Ministry of Education.



TABLE 1.

RETURN OF PERIODIC MEDICAL INSPECTIONS DURING THE YEARS  
ENDED 31st DECEMBER, 1947 AND 1948.

## A. PERIODIC MEDICAL INSPECTIONS :—

Number of inspections in the prescribed groups :—

	<u>1947</u>	<u>1948</u>
Entrants (5-7 years) ... ..	3,211	3,227
Second Age Group (8 years) ... ..	1,780	1,670
Third Age Group (12-15 years) ... ..	4,971	5,567
Totals ... ..	<u>9,962</u>	<u>10,464</u>
Number of other Periodic Inspections (9-11 years) ... ..	2,037	1,847
Grand Totals ... ..	<u>11,999</u>	<u>12,311</u>

## B. OTHER INSPECTIONS :—

	<u>1947</u>	<u>1948</u>
Number of Special Inspections ... ..	1,713	2,073
Number of Re-inspections ... ..	183	635
Totals ... ..	<u>1,896</u>	<u>2,708</u>

C. NUMBER OF CHILDREN FOUND AT PERIODIC MEDICAL INSPECTIONS TO REQUIRE  
TREATMENT (EXCLUDING DEFECTS OF NUTRITION, UNCLEANLINESS, AND DENTAL  
DEFECTS).

Group.	For Defective Vision (excluding Squint). (1)		For all other conditions recorded in Table 2. (2)		Total of Individual Pupils. (3)	
	1947	1948	1947	1948	1947	1948
Entrants ... ..	225	168	516	500	657	612
Second Age Group ... ..	100	75	230	171	276	218
Third Age Group ... ..	236	155	635	509	729	584
Totals ... ..	561	398	1,383	1,180	1,662	1,414
Other Periodic Inspections ...	118	99	252	231	361	273
GRAND TOTALS ... ..	679	497	1,635	1,411	2,023	1,687

TABLE 2.

A. RETURN OF ALL DEFECTS FOUND AT PERIODIC MEDICAL INSPECTIONS DURING THE YEARS ENDED 31st DECEMBER, 1947 AND 1948.

Defect or Disease.					Number of Defects.							
					Routine Inspections.				Special Inspections.			
					Requiring treatment.		Requiring to be kept under observation, but NOT requiring treatment.		Requiring treatment.		Requiring to be kept under observation, but NOT requiring treatment.	
					1947	1948	1947	1948	1947	1948	1947	1948
Number of INDIVIDUAL CHILDREN having defects which require treatment or to be kept under observation ...					2,023	1,687	1,190	2,003	485	542	539	697
Skin ... ..					126	95	40	36	21	23	7	7
Eye	{	Defective Vision (excluding Squint) ... ..			679	497	353	301	177	128	75	100
		Squint ... ..			59	53	42	53	30	14	14	11
		Other Conditions ... ..			32	54	10	11	7	7	2	4
Ear	{	Defective Hearing ... ..			36	45	29	34	22	19	11	24
		Otitis Media ... ..			25	32	20	51	5	9	4	13
		Other Ear Diseases ... ..			17	7	18	33	3	3	—	6
Nose and Throat ... ..					464	441	613	632	67	115	136	120
Defective Speech ... ..					14	20	23	49	12	21	39	42
Enlarged Cervical Glands ... ..					20	15	101	118	2	8	36	27
Heart and Circulation ... ..					55	43	25	170	16	5	43	32
Lungs ... ..					37	45	113	145	11	21	46	70
Develop-mental	{	Hernia ... ..			12	4	1	7	1	1	—	3
		Other Conditions ... ..			25	10	9	5	11	8	2	6
Orthopaedic	{	Posture ... ..			127	76	144	118	17	17	31	26
		Flat Foot ... ..			151	91	290	185	16	28	45	53
		Other Conditions ... ..			81	79	111	91	19	34	25	45
Nervous System	{	Epilepsy ... ..			6	3	6	6	5	13	10	13
		Other Conditions ... ..			27	7	15	22	13	7	11	13
Psychological	{	Development ... ..			33	37	63	37	52	84	109	117
		Stability ... ..			25	29	37	39	10	15	19	35
Other Defects and Diseases ... ..					263	225	304	276	62	89	80	91
TOTALS (excluding Individual Children) ... ..					2,314	1,908	2,367	2,419	579	669	745	858





TABLE 3.

## GROUP I.—MINOR AILMENTS (EXCLUDING UNCLEANLINESS).

Skin—	1947	1948
Ringworm of Scalp—		
(i) X-ray Treatment ... ..	18	5
(ii) Other Treatment ... ..	2	1
Ringworm of Body ... ..	16	24
Scabies ... ..	119	51
Impetigo ... ..	278	190
Other Skin Diseases ... ..	95	47
Eye Disease (external and other, but excluding errors of refraction, squint, and cases admitted to hospital) ... ..	136	173
Ear Defects (excluding operative treatment) ... ..	83	192
Miscellaneous (e.g., minor injuries, bruises, sores, chilblains, etc.)	2,095	2,622
<b>Total ... ..</b>	<b>2,842</b>	<b>3,305</b>
<b>Total number of attendances at Minor Ailments Clinics ... ..</b>	<b>9,925</b>	<b>11,173</b>

## GROUP II.—DEFECTIVE VISION AND SQUINT (EXCLUDING EYE DISEASES TREATED AS MINOR AILMENTS, GROUP I).

Errors of Refraction (including squint) ... ..	2,603	3,857
Other Defects or Disease of the Eyes (excluding those diseases in Group I) ... ..	27	27
<b>Total ... ..</b>	<b>2,630</b>	<b>3,884</b>

## Number of children for whom :—

Spectacles were prescribed ... ..	736	1,051
Spectacles were obtained (up to 5th July, 1948) ... ..	736	729

## GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

## Received Operative Treatment :—

(a) For adenoids and chronic tonsillitis ... ..	355	244
(b) For other nose and throat defects ... ..	2	—
Received other forms of treatment ... ..	—	—

## GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals or hospital schools	75	49
(b) Number treated otherwise, e.g., in clinics or out-patient departments ... ..	558	409

## GROUP V.—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY.

## Number treated :—

(a) Under Child Guidance arrangements ... ..	130	139
(b) Under Speech Therapy arrangements ... ..	18	67

TABLE 4.

DENTAL INSPECTION AND TREATMENT FOR THE YEARS  
ENDED 31st DECEMBER, 1947 AND 1948.

							<u>1947</u>	<u>1948</u>
(1) Number of pupils inspected :—								
(a) Periodic Age Groups	...	...	...	...	...	...	20,925	20,839
(b) Specials	...	...	...	...	...	...	806	705
Totals	...	...	...	...	...	...	<u>21,731</u>	<u>21,544</u>
(2) Number found to require treatment	...	...	...	...	...	...	12,026	11,910
(3) Number actually treated	...	...	...	...	...	...	7,531	7,060
(4) Attendances made for treatment	...	...	...	...	...	...	12,387	13,447
(5) Half-days devoted to—								
(a) Inspection	...	...	...	...	...	...	246	227
(b) Treatment	...	...	...	...	...	...	1,848	1,874
Totals	...	...	...	...	...	...	<u>2,094</u>	<u>2,101</u>
(6) Fillings—								
(a) Permanent Teeth	...	...	...	...	...	...	5,805	5,985
(b) Temporary Teeth	...	...	...	...	...	...	1,492	1,100
Totals	...	...	...	...	...	...	<u>7,297</u>	<u>7,085</u>
(7) Extractions—								
(a) Permanent Teeth	...	...	...	...	...	...	1,224	1,117
(b) Temporary Teeth	...	...	...	...	...	...	6,179	7,273
Totals	...	...	...	...	...	...	<u>7,403</u>	<u>8,390</u>
(8) Administrations of General Anaesthetic for Extractions	...	...	...	...	...	...	1,280	886
(9) Other Operations—								
(a) Permanent Teeth	...	...	...	...	...	...	989	1,546
(b) Temporary Teeth	...	...	...	...	...	...	322	919
Totals	...	...	...	...	...	...	<u>1,311</u>	<u>2,465</u>

TABLE 5.

INFESTATION WITH VERMIN.

						<u>1947</u>	<u>1948</u>
Total number of examinations, in the schools, by the school nurses or other authorized persons	...	...	...	...	...	39,604	59,055
Total number of individual pupils found to be infested	...	...	...	...	...	1,160	1,736
Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	...	...	...	...	...	—	89
Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (3), Education Act, 1944)	...	...	...	...	...	—	—

TABLE 6.

## NURSERY SCHOOLS.

A. INSPECTIONS BY ASSISTANT SCHOOL MEDICAL OFFICERS DURING THE YEARS ENDED 31st DECEMBER, 1947 AND 1948.

(i) Numbers examined :—

Years.	Number of schools.	Number of children examined.				
		2 Years.	3 Years.	4 Years.	5 Years.	Total.
1947 ...	8	98	175	73	1	347
1948 ...	13	97	179	175	7	458

(ii) Classification of General Condition :—

Years.	Number of schools.	Number of children examined.	A (good)		B (fair)		C (poor)	
			Number	Per cent	Number	Per cent	Number	Per cent
1947 ...	8	347	15	4.3	289	83.2	43	12.3
1948 ...	13	458	103	22.4	314	68.5	41	8.9



TABLE 6—*continued.*(iii) RETURN OF ALL DEFECTS FOUND AT MEDICAL INSPECTIONS. (*Complete figures only available as from 1st January, 1948.*)

Defect or Disease.	Number of Defects.			
	Routine Inspections.		Special Inspections.	
	Requiring treatment.	Requiring to be kept under observation, but NOT requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but NOT requiring treatment.
Number of INDIVIDUAL CHILDREN having defects which required treatment or to be kept under observation ...	160	238	31	56
Skin ... ..	13	1	2	—
Eye { Defective Vision (excluding Squint) ... ..	1	—	—	—
	20	6	4	2
	5	—	1	—
Ear { Defective Hearing ... ..	1	2	—	—
	3	1	—	—
	—	—	—	—
Nose and Throat ... ..	5	171	1	35
Defective Speech ... ..	4	12	1	2
Enlarged Cervical Glands ...	—	101	—	24
Heart and Circulation ...	6	29	3	21
Lungs ... ..	7	6	1	4
Developmental { Hernia ... ..	—	2	—	—
	6	1	—	1
Orthopaedic { Posture ... ..	5	3	2	—
	—	—	—	—
	68	11	14	—
Nervous System { Epilepsy ... ..	—	—	—	—
	1	—	—	—
Psychological { Development ...	—	—	—	—
	—	—	—	—
Other Defects and Diseases ...	36	3	6	1
TOTALS (excluding Individual Children) ... ..	181	349	35	90

TABLE 6—*continued.*

## B. INSPECTIONS BY SCHOOL NURSES (AS FROM JUNE, 1947).

Year.	Number of Schools.	Number of Children inspected.	Number found unclean.	Number Excluded.	
				Verminous.	Other Conditions.
1947 ...	8	433	2	—	—
1948 ...	13	952	43	6	—

C. DENTAL INSPECTION AND TREATMENT DURING THE YEAR ENDED 31ST DECEMBER, 1948. (*Nursery Schools not dentally inspected or treated during 1947.*)

(1)	Number of pupils inspected	...	...	...	...	172
(2)	Number found to require treatment	...	...	...	...	61
(3)	Number actually treated...	...	...	...	...	24
(4)	Attendances made for treatment	...	...	...	...	26
(5)	Fillings—					
	(a) Permanent Teeth	...	...	...	...	3
	(b) Temporary Teeth	...	...	...	...	10
	Total	...	...	...	...	13
(6)	Extractions—					
	(a) Permanent Teeth	...	...	...	...	—
	(b) Temporary Teeth	...	...	...	...	7
	Total	...	...	...	...	7
(7)	Other operations—					
	(a) Permanent Teeth	...	...	...	...	—
	(b) Temporary Teeth	...	...	...	...	27
	Total	...	...	...	...	27

TABLE 7.  
HANDICAPPED PUPILS.  
RESULTS OF EXAMINATIONS AT PERIODIC MEDICAL INSPECTIONS.

Defect.	Considered to be capable of receiving education in an ordinary class in an ordinary school.		Considered to require education in a special class in an ordinary school.		Considered to require education in a special school.		Total.	
	1947	1948	1947	1948	1947	1948	1947	1948
Blind (A) ... ..	—	—	—	—	—	—	—	—
Partially Blind (B)	17	8	8	4	5	3	30	15
Deaf (C) ... ..	2	—	—	1	1	2	3	3
Partially Deaf (D) ...	20	20	11	10	1	4	32	34
Delicate (E) ... ..	100	86	21	10	18	10	139	106
Diabetic (F) ... ..	3	3	6	—	1	—	10	3
Educationally Sub-normal (G) ...	327	322	287	161	49	42	663	525
Epileptic (H) ...	33	22	8	2	7	3	48	27
Maladjusted (I) ...	38	54	16	3	7	3	61	60
Physically Handicapped (J)...	180	198	13	5	14	8	207	211
Speech (K) ... ..	44	42	19	15	10	10	73	67
Total... ..	764	755	389	211	113	85	1,266	1,051
Multiple Defects (L) (not included in above)	48	56	48	35	10	12	106	103
GRAND TOTAL ...	812	811	437	246	123	97	1,372	1,154



TABLE 8.

## MATERNITY AND CHILD WELFARE.

SUMMARY OF WORK CARRIED OUT BY MEMBERS OF THE SCHOOL HEALTH STAFF DURING  
THE YEAR ENDED 31ST DECEMBER, 1948.

(Detailed figures not available until 1st January, 1948.)

## A. DENTAL TREATMENT.

(i) *Ante-natal.*

Total number treated.	Total number of attendances.	Fillings.	Extractions.	Number of administra- tions of general anaesthetic.	Other operations.
22	65	42	20	4	1

(ii) *Children under five years of age.*

Total number treated.	Total number of attendances.	Fillings.	Extractions.	Number of administra- tions of general anaesthetic.	Other operations.
214	260	217	135	41	70

## B. TREATMENT FOR DEFECTIVE VISION.

Total number of requests for treatment.	Results of Treatment.			Number failed to keep appointment at clinic.
	Recommended to obtain spectacles.	Recommended treatment other than by spectacles.	Not considered to require treatment.	
176	21	21	96	38

TABLE 9.

NUMBERS OF CHILDREN IN SPECIAL RESIDENTIAL SCHOOLS,  
CONVALESCENT HOMES, ETC., DURING THE TWO YEARS ENDED  
31st DECEMBER, 1948.

Defect.	Number of in-patients on 1st January, 1947.	Number admitted during the two years.	Maximum number of in-patients during the two years.	Number discharged during the two years.	Number of in-patients on 31st December, 1948.
Blind ... ..	6	4	10	3	7
Partially Blind ...	2	2	4	—	4
Deaf and Dumb	15	10	25	6	19
Educationally Sub-normal ...	3	2	5	2	3
Epileptic... ..	4	2	6	2	4
Heart ... ..	—	5	5	1	4
Maladjusted ...	1	15	16	6	10
Miscellaneous ...	8	69	77	51	26
Physically Defective ...	20	79	99	79	20
Spastic Paralysis	—	2	2	—	2
TOTAL ...	59	190	249	150	99

## MILK IN SCHOOLS.

SUMMARY OF SPECIAL ENQUIRY MADE DURING JUNE, 1948.

Number of schools circulated ...	...	...	...	...	...	258
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Number of schools supplied with milk in $\frac{1}{3}$ -pint bottles ...	...	225
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Number of schools supplied in bulk ...	...	33
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Grades of Milk and number of Schools so supplied :—

Tuberculin-Tested	...	...	...	...	...	46
Pasteurised Tuberculin-Tested	...	...	...	...	...	3
Pasteurised...	...	...	...	...	...	166
Heat Treated	...	...	...	...	...	11
Accredited ...	...	...	...	...	...	14
Ungraded ...	...	...	...	...	...	13
Tuberculin-Tested and Pasteurised	...	...	...	...	...	1
Tuberculin-Tested and Accredited	...	...	...	...	...	4
Total	...	...	...	...	...	258

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Method of taking Milk and number of Schools :—

By Straws ...	...	...	...	...	...	174
By Straws (but in insufficient quantity)	...	...	...	...	...	6
Direct from Bottles	...	...	...	...	...	31
Direct from Bottles and by Cups	...	...	...	...	...	1
By Cups, Mugs, and/or Beakers ...	...	...	...	...	...	39
By Cups, etc., and/or Straws	...	...	...	...	...	7
Total	...	...	...	...	...	258

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